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Avelyne Malonzo	(Depositor's name)
pelyne Molon	(Signature)
July 19, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/621 431	07/16/2003	Chi-Hui Lin	B-5158 621093-8	1733

TITLE OF INVENTION: STACKED GATE FLASH MEMORY DEVICE AND METHOD OF FABRICATING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330)	\$300	\$1630	07/09/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS	7		
BOOTH, RICHARD A		2812		257-321000	_		
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). □ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. □ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 2 LADAS & PARRY 2 agents & PARRY				
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Advance Order - # of	Copies		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 12-0415 (enclose an extra copy of this form).				
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